

## **Important Notice from Health Insurance Risk Sharing Plan About Your Prescription Drug Coverage and Medicare**

**Please read this notice carefully and keep it where you can find it. This notice has information about your prescription drug coverage through the Health Insurance Risk Sharing Plan (HIRSP) and prescription drug coverage available through Medicare. This letter also explains the options you have under Medicare prescription drug coverage and can help you decide whether you want to change your Medicare drug coverage. At the end of this notice is information about where you can get help to make decisions about your Medicare prescription drug coverage.**

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### **HIRSP Policyholders with Medicare**

**Plan 2** – To be eligible for HIRSP Plan 2, you must be enrolled in Medicare Part A, Part B, **and** Part D. HIRSP has determined that the prescription drug coverage offered by HIRSP Plan 2 is creditable coverage as defined by Medicare.

For Plan 2 policyholders, HIRSP will only cover drugs that are included in your Medicare Part D formulary (drug list). Your Part D policy will pay first and HIRSP will pay second.

Your current HIRSP coverage pays for other health expenses in addition to prescription drugs. You will need to continue enrollment in Medicare Part A, B **and** D to remain eligible for HIRSP Plan 2 health and prescription drug benefits.

**Plan 1** – Policyholders not enrolled in all three parts of Medicare (Parts A, B **and** D), are eligible for HIRSP Plan 1 (Option A or B). HIRSP has determined that the prescription drug coverage offered by HIRSP Plan 1 is also creditable coverage. For Plan 1 policyholders, HIRSP will only cover prescription drugs listed on the HIRSP formulary.

If you drop your HIRSP coverage, you will not be able to re-apply for HIRSP for 12 months. At that time, you will need to fill out a new application and meet eligibility requirements. If during those 12 months you turn 65 years old, you will not be able to re-apply for HIRSP.

**For more information about this notice, please contact our office at (800) 828-4777.**

You will receive this notice annually. You may also receive notices before the next period when you can enroll in or change Medicare prescription drug coverage, and if your creditable coverage through HIRSP changes. The following information briefly explains your enrollment options for Medicare Part D, the prescription drug benefit. You will be contacted directly by Medicare with more details regarding these options.

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## Medicare prescription drug coverage

Individual's can enroll in a Medicare prescription drug plan when they first become eligible for Medicare and each year from November 15<sup>th</sup> through December 31<sup>st</sup>. Beneficiaries leaving employer/union coverage may be eligible for a Special Enrollment Period to sign up for a Medicare prescription drug plan.

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare prescription drug plans. For more information about Medicare prescription drug plans:

- Visit [www.medicare.gov](http://www.medicare.gov)
- Call your State Health Insurance Assistance Program (see your copy of the Medicare & You handbook for their telephone number), or
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

For people with limited income and resources, extra help paying for Medicare prescription drug coverage is available. Information about this extra help is available from the Social Security Administration (SSA) online at [www.socialsecurity.gov](http://www.socialsecurity.gov), or you may call them at 1-800-772-1213 (TTY 1-800-325-0778).

**Remember: Keep this notice. If you decide to enroll in a Medicare prescription drug plan, you may be required to provide a copy of this notice when you join. Without this notice, if you did not enroll in Medicare prescription drug coverage when you first became eligible, you may be required to pay higher premiums for your Medicare prescription drug coverage.**

Date:	November, 2006
Name of Entity/Sender:	Wisconsin Health Insurance Risk Sharing Plan (HIRSP)
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Phone Number:	1-800-828-4777 or (608) 221-4551, Monday through Thursday 7:00am to 7:00pm and Friday 7:00am to 4:30pm.